

**Council on Postsecondary Education  
Endowment Match Program  
Match Request Form**

Please complete a separate form for each endowment for which matching funds are requested. Attach supporting documentation, including Notice of Board Approval, photocopies of checks, and donor gift and pledge agreements.

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Institution

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Request Date

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Title of Endowment

1. Is this a new endowment or an expansion of an existing endowment?

☐ New      ☐ Existing       /      /        
(Date established)

2. What activity will this endowment support? *(Please check all that apply)*

<u>Quantity</u>	<u>Activity</u>
<u>      </u>	<input type="checkbox"/> Chair(s)
<u>      </u>	<input type="checkbox"/> Professorship(s)
<u>      </u>	<input type="checkbox"/> Graduate fellowship
<u>      </u>	<input type="checkbox"/> Undergraduate scholarship
<u>      </u>	<input type="checkbox"/> Mission support project(s)

3. For what college, school, center, or department will the investment earnings be expended?

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Organizational Unit

4. What academic program or programs will be supported by the endowment?  
*(Please provide Classification of Instructional Program code and description. The list of active program CIP codes is available on the Council's Web site at [http://www.cpe.state.ky.us/institutional/institutional\\_trustfunds.asp](http://www.cpe.state.ky.us/institutional/institutional_trustfunds.asp).)*

Program Code	Program Description
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

5. Which of the following areas of emphasis in the new economy will be supported by this endowment? *(Please check only one)*

- ☐ Human health and development
- ☐ Biosciences
- ☐ Materials science and advanced manufacturing
- ☐ Information technologies and communications
- ☐ Environmental and energy technologies
- ☐ None of the above

6. Which of the following outcomes are expected from the endowment?  
*(Please check all that apply)*

- ☐ Create new businesses that increase the number of good jobs in Kentucky.
- ☐ Create a critical mass of scholars who can influence the national research agenda.
- ☐ Promote interdisciplinary, problem solving, or applied research activities.
- ☐ Establish partnerships in the technologies, engineering, and applied sciences.
- ☐ Other \_\_\_\_\_

*(Please specify)*

7. In the space below, please provide the following information on each donor: the date the gift or pledge was received; the total amount of the gift and pledge; amount of cash received; pledge amount; pledge payment schedule; and, the final pledge payment due date. Use additional pages if necessary.

Donor Name <sup>1</sup>	Date Gift and Pledge Received	Gift and Pledge Amount	Amount of Cash Received	Pledge Amount	Pledge Payment Schedule <sup>2</sup>	Final Pledge Payment <sup>3</sup> Date

<sup>1</sup> Substitute the word “anonymous” if the donor requests confidentiality.

<sup>2</sup> Indicate whether pledge payments are expected monthly, quarterly, semi-annually, annually, or lump sum.

<sup>3</sup> Indicate month and year when pledge will be paid in full.